Pational Medicare TRAINING PROGRAM

CENTERS FOR MEDICARE & MEDICAID SERVICES



...helping people with Medicare make informed health care decisions

PART D BENEFIT PARAMETERS

Part D Benefit Parameters	2006	2007	2008	2009	2010	2011
Standard Benefit Design Parameters						
Deductible	\$250.00	\$265.00	\$275.00	\$295.00	\$310.00	\$310.00
Initial Coverage Limit	\$2,250.00	\$2,400.00	\$2,510.00	\$2,700.00	\$2,830.00	\$2,840.00
Out-of-Pocket Threshold	\$3,600.00	\$3,850.00	\$4,050.00	\$4,350.00	\$4,550.00	\$4,550.00
Total Covered Part D Drug Spend at OOP Threshold (2)	\$5,100.00	\$5,451.25	\$5,726.25	\$6,153.75	\$6,440.00	\$6,447.50
Minimum Cost-sharing in Catastrophic Coverage						
Generic/Preferred multi-source drug	\$2.00	\$2.15	\$2.25	\$2.40	\$2.50	\$2.50
Other	\$5.00	\$5.35	\$5.60	\$6.00	\$6.30	\$6.30
Part D Full Benefit Dual Eligible Parameters						
Copayments for Institutionalized Beneficiaries	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Maximum Copayments for non-institutionalized Benes						
Up to or at 100% FPL						
Up to Out-of-Pocket Threshold (1)						
Generic/Preferred multi-source drug	\$1.00	\$1.00	\$1.05	\$1.10	\$1.10	\$1.10
Other	\$3.00	\$3.10	\$3.10	\$3.20	\$3.30	\$3.30
Above Out-of-Pocket Threshold	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
Over 100% FPL						
Up to Out-of-Pocket Threshold						
Generic/Preferred multi-source drug	\$2.00	\$2.15	\$2.25	\$2.40	\$2.50	\$2.50
Others	\$5.00	\$5.35	\$5.60	\$6.00	\$6.30	\$6.30
Above Out-of-Pocket Threshold	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Part D Non-Full Benefit Dual Eligible Full Subsidy Parameters						
Resources (1)						
Maximum Copayments up to Out-of-Pocket Threshold						
Generic/Preferred multi-source drug	\$2.00	\$2.15	\$2.25	\$2.40	\$2.50	\$2.50
Other	\$5.00	\$5.35	\$5.60	\$6.00	\$6.30	\$6.30
Above Out-of-Pocket Threshold	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Resources (2)						
Deductible	\$50.00	\$53.00	\$56.00	\$60.00	\$63.00	\$63.00
Coinsurance up to Out-of-Pocket Threshold	15%	15%	15%	15%	15%	15%
Maximum Copayments above Out-of-Pocket Threshold						
Generic/Preferred multi-source drug	\$2.00	\$2.15	\$2.25	\$2.40	\$2.50	\$2.50
Others	\$5.00	\$5.35	\$5.60	\$6.00	\$6.30	\$6.30

Part D Benefit Parameters Revised April 2011

Part D Benefit Parameters	2006	2007	2008	2009	2010	2011
Part D Non-Full Benefit Dual Eligible Partial Subsidy Parameters						
Deductible	\$50.00	\$53.00	\$56.00	\$60.00	\$63.00	\$63.00
Coinsurance up to Out-of-Pocket Threshold	15%	15%	15%	15%	15%	15%
Maximum Copyments above Out-of-Pocket Threshold						
Generic/Preferred multi-source drug	\$2.00	\$2.15	\$2.25	\$2.40	\$2.50	\$2.50
Other	\$5.00	\$5.35	\$5.60	\$6.00	\$6.30	\$6.30
Retiree Drug Subsidy Amounts						
Cost Threshold	\$250.00	\$265.00	\$275.00	\$295.00	\$310.00	\$310.00
Cost Limit	\$5,000.00	\$5,350.00	\$5,600.00	\$6,000.00	\$6,300.00	\$6,300.00

Resources (1)

2006 Resources \leq \$6,000 (individuals) or \leq \$9,000 (couples) 2007 Resources \leq \$6,120 (individuals) or \leq \$9,190 (couples) 2008 Resources \leq \$6,120 (individuals) or \leq \$9,190 (couples) 2009 Resources \leq \$8,100 (individuals) or \leq 12,910 (couples) 2010 Resources \leq \$8,100 (individual) or \leq \$12,910 (couples)

Resources (2)

2006 Res. Bet. \$6,000-\$10,000 (ind) or \$9,000-\$20,000 (couples) 2007 Res. Bet. \$6,120-\$10,210 (ind) or \$9,190-\$20,410 (couples) 2008 Res. Bet. \$6,120-\$10,210 (ind) or \$9,190-\$20,410 (couples) 2009 Res Bet. \$8,100-\$12,510 (ind) or \$12,910-\$25,010 (couples) 2010 Res Bet. \$8,100-\$12,510 (ind) or \$12,910-\$25,010 (couples)



Reference: http://www.cms.gov/PrescriptionDrugCovContra/Downloads/2011CombinedCallLetter.pdf

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